

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	80	15516	4/7/00
O.I.P.E. CLASSIFIER		8	4-13-00
FORMALITY REVIEW		59383	6-12-08
RESPONSE FORMALITY REVIEW	5612	67719	9/12/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	2/5/04	
2	✓		
3	✓		
4	✓		
5	✓		
6	✓		
7	0		
8	0		
9	✓		
10	✓		
11	0		
12	0		
13	0		
14	0		
15	0		
16	0		
17	✓		
18	0		
19	✓		
20	✓		
21	✓		
22	✓		
23	✓		
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25	✓		
26	✓		
27	0		
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29	✓		
30	✓		
31	0		
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34	0		
35	0		
36	0		
37	✓		
38	0		
39	✓		
40	✓		
41	✓		
42	✓		
43	✓		
44	✓		
45	✓		
46	0		
47	0		
48	✓		
49	0		
50	0		

Claim	Final	Original	Date
51	0		
52	0		
53	✓		
54	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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